



NOTRE DAME
OF MARYLAND
UNIVERSITY

September 26, 2023

Sanjay K. Rai, Ph.D.
Acting Secretary of Higher Education
Maryland Higher Education Commission
6 N. Liberty Street, 10th Fl.
Baltimore, MD 21201
VIA EMAIL ATTACHMENT

RE: NDMU Objection to LUM Proposed Bachelor of Science in Nursing

Dear Secretary Rai:

Loyola University Maryland (LUM) has proposed a new Bachelor of Science in Nursing (BSN) degree program. The proposal was circulated on August 28, 2023. Notre Dame of Maryland University (NDMU) wishes respectfully to submit a formal objection to the approval of this program for your consideration in accordance with §11-206.1 of the Education Article of the Annotated Code of Maryland and COMAR (Code of Maryland Regulations) 13B.02.03.27. The basis of the objection is B(3)(a) (“Inconsistency of the proposed program with the institution’s approved mission”) and B(3)(c) (“Unreasonable program duplication which would cause demonstrable harm to another institution;”).

Mission

While NDMU does not claim to know the details of LUM’s Strategic Plan beyond publicly available information online (which does not mention nursing or expanding healthcare programs), we feel it is worth noting that LUM’s offering a Bachelor of Science in Nursing appears to be a deviation from their traditional mission (copied below for reference) as demonstrated via their current academic program offerings.¹

LUM University Maryland is a Jesuit, Catholic university committed to the educational and spiritual traditions of the Society of Jesus and to the ideals of liberal education and the development of the whole person. Accordingly, the University will inspire students to learn, lead, and serve in a diverse and changing world.

LUM does offer bachelor programs in Biology, Chemistry, Biochemistry, BioHealth, and Pre-Health. However, it does not offer any bachelor's degree programs and only two graduate degree programs leading to professional licensure in healthcare programs.^{2 3} LUM’s Strategic Plan emphasizes building “interdisciplinary connections among the liberal arts, STEM, and business,” as well as “placing a greater emphasis on graduate programs.” The discipline of nursing is not considered a STEM field.

Furthermore, as indicated in their proposal, LUM does not currently have the facilities

¹ <https://www.loyola.edu/about/strategic-plan> (The Ignatian Compass)

² <https://www.loyola.edu/admission/undergraduate/academics/majors-minors> (Majors and Minors)

³ <https://www.loyola.edu/departments/consumer-information/professional-licensure-disclosure>
(Professional Licensure Disclosure)

infrastructure necessary to operate a BSN program in accordance with COMAR 13B.02.03.13 (*Physical Facilities and Instructional Equipment*). We recognize LUM is willing to invest in establishing such facilities in the future via its Donnelly Science Building project. However, with declines in existing programs and in lieu of the addition of a new resource intensive program, it may be prudent for LUM to collaborate with other institutions that operate existing programs and already have extensive infrastructure in place to address and fill any perceived market gaps. Like NDMU, many of these institutions currently have excess capacity in their programs.

Demonstrable Harm

Geographic Proximity

Under COMAR 13B.02.03.09 (Duplication of the Proposed Program) geographic proximity to existing programs is a factor of consideration regarding program duplication. LUM is geographically contiguous with NDMU and is near eight other colleges and universities with entry-to-practice nursing programs.⁴ While most of LUM's undergraduate enrollment originates from out-of-state, in recent years, LUM has extended recruitment strategies to more in-state undergraduate students with appreciable success. From their efforts, LUM reported 36% in-state students for Fall 2022.⁵⁶⁷ This action plan appears to coincide strategically with projected decreases in high school graduates from New Jersey, Pennsylvania, and New York (LUM's top three out-of-state enrollment sources) and efforts in those states to reduce high school graduates opting for out-of-state higher education institutions.⁸ As LUM's recruitment of in-state students increases, the likelihood of causing demonstrable harm to existing Maryland institutions strongly increases, as Maryland's high school graduates are also expected to decline after 2026.

While LUM referred to several out-of-state institutions as its primary cross-application institutions, NDMU has seen a recent increase in cross-applications with Loyola. According to the National Student Clearing House (NSCH), in Fall 2022, NDMU admitted 29 students who enrolled at LUM, compared to nine in Fall 2019. While such numbers may not be significant for a larger institution, NDMU has a small traditional undergraduate program and small shifts make a demonstrable difference. As the BSN program is NDMU's largest traditional undergraduate major, if LUM is also approved to offer the BSN, it is reasonable to expect their program will draw students and faculty away from NDMU's nursing program and cause demonstrable harm.

Market Demand

The Bureau of Labor Statistics (BLS) under the U.S. Department of Labor, projects an increase of registered nursing ("RN") jobs from 3,172,500 in 2022 to 3,349,000 in 2032, an increase of 177,400 jobs (5.6%) nationally. Combined with 1,754,000 estimated occupational separations over ten years (175,400 annually), BLS projects 1,931,400 openings over ten years, or 193,140 annual openings. This is a significant cooling of nursing demand from previous BLS projections (2020-2030 and 2021-2031) which

4 Coppin State University, Johns Hopkins University, Morgan State University, Stevenson University, Towson University, University of Maryland Baltimore, Baltimore City Community College, and the Community College of Baltimore County

5 <https://www.loyola.edu/departments/financial-aid/undergraduate/programs/grants/charm-city-promise> (Charm City Promise Program)

6 <https://www.loyola.edu/departments/institutional-research/facts/fact-book/undergraduate-admissions> (Fact Book)

7 <https://www.loyola.edu/news/2023/0901-welcome-class-2027> (Loyola News)

8 <https://knocking.wiche.edu/dashboards/trends-across-states/> (Western Interstate Commission)

estimated a 9% and 6% growth in RN positions, respectively. This evidence of cooling is further supported by recent data from the National Center for Health Workforce Analysis (NCHWA) under the Health Resources & Services Administration, a division of the U.S. Department of Health and Human Services. NCHWA projects that the supply and demand for registered nurses will improve from 98% adequacy in 2025 to 100% adequacy by 2035.⁹ **In other words, the national supply of registered nurses is projected to steadily increase and meet projected demand.**

In Maryland, the Maryland Department of Labor (“MDOL”) projects (2020-2030) an increase in RN jobs from 71,386 jobs in 2020 to 83,711 jobs in 2030, an increase of 12,325 jobs (17.3%). Combined with 40,201 estimated occupational separations over ten years (~4,020 annually), MDOL projects 52,526 openings over ten years, or 5,253 annual openings. **The BLS projections serve as the basis for MDOL projections, and projected need for Registered Nurses has cooled significantly in the state.** Forthcoming MDOL projections for 2021-2031 will reflect that fact.

According to MHEC’s Academic Program Inventory and *Trends in Degrees and Certificates by Program Report* (2022), Maryland currently has fourteen community colleges and fourteen public and private four-year institutions that offer Associate of Science in Nursing, Bachelor of Science in Nursing, and/or entry-to-practice Master of Science in Nursing programs. In 2022, degree production is estimated at 5,528 degrees annually (3-YR rolling average of graduates **Compared to current MDOL data, this leads to the conclusion of an average annual oversupply of 275 graduates.** Furthermore, McDaniel College was recently approved to begin offering a BSN program and will further increase the supply of RNs and thus the oversupply.

Between 2013 and 2022, enrollment in nursing programs that prepare students to be registered nurses in Maryland has declined 30% from 19,886 in 2013 and 13,937 in 2023⁹. Nationally, according to the American Association of Colleges of Nursing (AACN), for the first time since 2000, enrollment in generic baccalaureate programs declined 1.4% last year, ending a 20-year period of enrollment growth. Baccalaureate applications were also down 2.4% year-to-year.¹⁰ While LUM’s proposal refers to the high number of qualified applicants not accepted nationwide, this is simply not the case in Maryland. **Maryland nursing programs once enrolled nearly 20,000 students compared to 14,000 now.**

The 42nd annual report on enrollment and graduation, AACN’s 2022-2023 Enrollment and Graduations in Baccalaureate and Graduate Programs in Nursing publication reported Maryland experienced the second highest loss in enrollment. Puerto Rico was first at -29.2, while Louisiana was a distant third at -8.2. LUM claims it will recruit students from surrounding states, particularly Delaware, New York, New Jersey, and Pennsylvania for the proposed BSN program. All four states experienced decreased enrollment in reporting years 2021 and 2022. Delaware was -1.6, New York was -4.1, New Jersey was -2.6, and the highest decline was Pennsylvania at -6.0. West Virginia is not a positive prospect either with a decline in nursing enrollment (-2.9) and Virginia showing a minimal (0.3) nursing enrollment change.¹¹ Table 1 shows Maryland’s generic

9 <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/Nursing-Workforce-Projections-Factsheet.pdf> (Nurse Workforce Projections, 2020-2035)

10 <https://www.aacnnursing.org/news-data/all-news/new-data-show-enrollment-declines-in-schools-of-nursing-raising-concerns-about-the-nations-nursing-workforce> (Enrollment Declines in Schools of Nursing)

11 American Association of Colleges of Nursing. *2022-2023 Enrollment and Graduate in Baccalaureate and Graduate Programs in Nursing. Table 15. Generic baccalaureate enrollment changes in the same*

baccalaureate enrollment changes from 2019 to 2022.

American Association of Colleges of Nursing. 2022-2023 Enrollment and Graduate in Baccalaureate and Graduate Programs in Nursing. *Table 15. Generic baccalaureate enrollment changes in the same schools reporting in both 2021 and 2022 by region and state.* p.36

Table 1

Maryland's Generic* Baccalaureate Enrollment Changes

Back-to-Back Years	Number of Reporting Schools	Percent Change in Maryland
2019 and 2020	771	+4.4
2020 and 2021	784	-1.5
2021 and 2022	803	-20.0

* AACN defines generic baccalaureate programs as programs that admit students with no previous nursing education and awards a baccalaureate nursing degree. The program requires at least four but not more than five academic years of full-time equivalent college academic work.

Furthermore, there is no guarantee that out-of-state students (who will take up valuable clinical placement slots -- see below) will decide to reside in Maryland upon graduation and contribute to Maryland's healthcare sector. Upon graduation students must take the NCLEX-RN exam to become licensed and graduates are required to take the NCLEX-RN in the state in which they are a legal resident. Many out-of-state students do not become Maryland residents during their college enrollment and return home to seek initial licensure. For individuals to seek initial licensure in Maryland, they must take additional steps prior to graduating to become Maryland residents such as establishing a domicile or obtaining a driver's license. Additionally, the median wages for out-of-state nurses in New York and New Jersey surpass those of Maryland creating another incentive for fiscally conscious students to return home.¹²

Approving a new baccalaureate program when many existing programs in Maryland in proximity to LUM, particularly NDMU, are not fully enrolled, appears imprudent. This reflects a challenge of demand (i.e., student interest) not supply (i.e., capacity in nursing programs) to overcome. This challenge will not be solved by adding a new program and further dividing a shrinking pie (and in the process causing demonstrable harm to NDMU) but rather via targeted government and healthcare sector interventions (e.g., financial aid, loan forgiveness, marketing, improved compensation, and work conditions, etc.). The State would be best served by supporting programs that are already fully operational to attract and retain qualified, culturally diverse students, who are already committed to working in Maryland. The challenge of inadequate demand will be further exacerbated by adding another baccalaureate program in the Greater Baltimore metropolitan area.

Clinical Site Shortage

Under the section, "*Quantifiable and Reliable Evidence and Documentation of Market Supply and Demand in the Region and State,*" LUM refers to the AACN October 2022 Fact Sheet, published on their website. The fact sheet (October 2021) states that U.S. nursing schools turned away 91,938 qualified

schools reporting in both 2021 and 2022 by region and state. p.36

12 <https://www.bls.gov/oes/current/oessrcst.htm> (Healthcare Practitioners and Technical Occupations)

applications for baccalaureate and graduate nursing programs.¹³ The implication in LUM's reference to the AACN Fact Sheet is that MHEC needs only to approve another nursing program and the nursing shortage will be influenced in a positive way.

However, a newer publication, 2022-2023 Enrollment and Graduations, sent to member-only organizations in 2023, presents a more realistic picture of why qualified applications were not offered admission. In this report, AACN notes that 66,274 'qualified applications were not admitted' to baccalaureate programs. Nursing programs chose 'insufficient clinical sites' as the number one reason for not admitting qualified applications' Table 2 shows a fluctuation of 'qualified applications not offered admission' over the past three years, while the percentage of 'insufficient clinical sites' cited by responding programs jumped 12.6% in reporting year 2022-2023.

Table 2

Percentage of Reporting Schools Citing Insufficient Clinical Sites

Reporting Year August 1 to July 31	Number of Reporting Member Schools	Qualified Applications Not Offered Admission	Percentage of Reporting Schools Citing Insufficient Clinical Sites
2020-2021	368	66,261	69%
2021-2022	363	76,140	68.6%
2022-2023	261	66,274	81.2%

Individuals outside of nursing education are not aware of the serious clinical placement hardships most baccalaureate nursing programs face every semester and multiple times per semester. NDMU argues that LUM's and Mercy's partnership will adversely impact clinical learning experiences.

Notre Dame offers seven nursing courses with clinical components; students complete 90 hours per clinical course where at least 60% are planned direct care experiences in regional healthcare facilities.¹⁴ The clinical coordinator arranges clinical learning experiences at multiple sites for 150-170 students, which is equivalent to 12-15 separate clinical groups, every seven to eight – or sometimes sixteen -- weeks, 12 months of the year. The seventh and final course with a clinical component requires the clinical placement coordinator to locate preceptors for all enrolled students in all regional healthcare organizations.

The clinical placement coordinator uses the same web-based clinical placement request system that many acute-care facilities use to streamline requests for placements from all Maryland's nursing programs. **NDMU's clinical placement coordinators make strenuous efforts to be the first nursing program to enter clinical placements requests in any given semester. Request denial is routine, especially for specialty areas such as mental health, pediatrics, and maternal-child care.**

All nursing education programs are attuned to obstacles during the clinical placement phase. The first obstacle is competition among the existing twenty-eight colleges and universities, all of whom are also planning the same type of clinical learning experiences. Revising and re-vamping clinical learning

¹³<https://www.aacnnursing.org/Portals/0/PDFs/Fact-Sheets/Nursing-Shortage-Factsheet.pdf>
(Fact sheet: Nursing shortage)

¹⁴ <https://www.ndm.edu/undergraduate/academics/programs/nursing-entry-level-bsn> (Four-Year Plan)

experiences related to placement difficulties is an everyday reality in nursing programs. The introduction of another nursing program which is geographically close to existing nursing programs and healthcare facilities into the market will further compound this reality.

The second obstacle nursing programs face is that University of Maryland and Johns Hopkins offer their affiliated schools of nursing priority before accepting other nursing programs' requests. The third obstacle is that clinical units within a healthcare facility often restrict the number of days per week students from any nursing program are on that unit. The fourth obstacle is the need to locate multiple sites for the same specialty, such as mental health, pediatrics, and maternal-child due to restrictions placed either by Maryland Board of Nursing or the institution. For example, a children's or mother and baby unit typically caps the student number at five to eight per unit. Thus, multiple healthcare facilities or multiple units within the same facility must be solicited to assure students they will have appropriate clinical learning experiences to fulfill course and clinical outcomes. The fifth obstacle is some healthcare facilities limit clinical placements to one specific area, such as medical-surgical units. The final obstacle is not all healthcare facilities have specialty units, and on the other hand, some healthcare facilities have small-capacity specialty units, such as pediatrics at Mercy, and do not have enough patient assignments to warrant a group of nursing students.

LUM stated that their clinical placements would take place at Mercy's downtown medical center, primary care locations, and affiliate sites, without impacting Mercy's ability to place clinical students at Mercy from other programs with existing clinical placements at Mercy. This is simply not realistic and is no guarantee. It is likely that LUM, if approved, would have to expand beyond Mercy to place students at other clinical sites. For example, the sparse number of available patient assignments in the pediatric units will require LUM to look at clinical placement sites used by other nursing programs.

NDMU's School of Nursing has partnerships with 19 healthcare facilities, including Mercy, and routinely uses all of them. NDMU is grateful to Mercy Hospital who welcomed approximately 50 NDMU students for clinical learning experiences to multiple hospital units throughout the calendar year. The approval of LUM's proposed nursing program may push other colleges and universities to seek priority or exclusive partnerships with other healthcare organizations for clinical placements. This is another step down the dangerous and financially costly road of institutions being forced to pay for RN clinical sites or preceptors. Compensating nurse practitioner preceptors is already occurring throughout Maryland. Throughout our over 40 year history in healthcare education, NDMU has never paid for clinical sites or preceptors.

Faculty Shortage

While LUM's proposal includes a hiring plan, it does not meaningfully address how they plan to recruit and hire nurse educators amidst a national and State faculty shortage. AACN (2023) member schools reported faculty shortages as the second highest reason for limiting student capacity.¹⁵ The first reason, as explained in the previous section, is insufficient clinical sites. Table 3 shows the number and percentage of reporting schools citing insufficient number of faculty as a reason for limiting student capacity.

¹⁵ American Association of Colleges of Nursing. 2022-2023 Enrollment and Graduate in Baccalaureate and Graduate Programs in Nursing. *Table 40. Reasons for not admitting all qualified applications by program time. Insufficient number of faculty. p.88*

Table 3

Number And Percentage of Reporting Schools Citing Insufficient Number Faculty as a Reason for Limiting Student Capacity

Reporting Year August 1 to July 31	Number of Reporting Member Schools	Qualified Applications Not Offered Admission	Percentage of Reporting Schools Citing Insufficient Faculty
2020-2021	368	66,274	49.7%
2021-2022	363	76,140	50.7%
2022-2023	261	66,261	57.1%

Maryland's nurse faculty shortage mirrors the U.S. faculty vacancy rates. According to the Maryland Health Services and Cost Review Commission (HSCRC), Maryland's nurse faculty vacancy rates increased slightly from an average of 8.1% between 2015-2017 academic years to an average of 9.2% between 2019-2021.¹⁶ Despite the statewide initiatives through the NSP II, the faculty shortage in Maryland closely mirrors the nation faculty vacancy rate.¹⁷ Table 4 shows these changes and the national faculty vacancy rate.

Table 4

Changes in Maryland Nurse Faculty Vacancy, AY (Academic Year) 2015 – 2021

Academic Year/Maryland Nursing Programs	FT Faculty	FT Faculty Vacancy	% FT Faculty Vacancy
2015-2017 (N=25)	518	42	8.1%
2019-2021 (N=26)	363	58	9.2%
Difference (increase/decrease)	261	16	+1.1%
AACN U.S. Faculty Vacancy Rate (October 2022)			8.8%

AACN reported enrollment in master's programs decreased by 9.4% since 2021, marking the second year of enrollment declines (the first since 2001).¹⁸ Deans/directors in Maryland's colleges and universities that academically prepare master's level nurse educators have voiced frustration about the decrease in student demand in earning a Master of Science in Nursing and subsequently commitment to full-time

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<https://hscrc.maryland.gov/Documents/Final%20NSP%20II%20FY%202023%20Report%2004252022.docx.pdf> (Maryland Health Services Cost Review Commission (May 11, 2021). Nurse Support Program II. Competitive Institutional Grants Program)

¹⁷ <https://www.aacnnursing.org/news-data/fact-sheets/nursing-faculty-shortage> (Nursing Faculty Shortage Fact Sheet)

¹⁸ <https://www.aacnnursing.org/news-data/all-news/new-data-show-enrollment-declines-in-schools-of-nursing-raising-concerns-about-the-nations-nursing-workforce> (Enrollment Declines by Program Level)

teaching in an academic setting. While many factors impact this lack of interest, deans/directors face a substantial gap between nursing salaries in academia and clinical practice. Given the faculty shortage, declining number of nurses entering academia, and existing number of entry-to-practice programs, programs struggle with recruiting and retention of highly qualified nursing faculty. As a result, search processes are long and costly. Adding another entry-to-practice program in the State will only further increase the already intense competition for qualified faculty. The prospect of an additional program raises further concerns that any program can ensure that all faculty are appropriately experienced and academically qualified in alignment with State and accreditation requirements. Given LUM's and NDMU's geographic proximity, the likelihood of demonstrable harm with faculty competition is significant.

Opportunities for Collaboration

NDMU has a long history of collaboration with LUM, displayed via our shared library. NDMU, as a collegial partner in higher education, welcomes the opportunity to work with LUM to develop a mutually beneficial arrangement for their current and prospective students to participate in NDMU's BSN program. Articulation agreements such as a traditional 2+2 or a 3+1, the latter option involving NDMU's accelerated second-degree BSN, present rich opportunities for further exploration. The synergy from such a collaboration between two adjacent Catholic higher education institutions has the potential to capitalize on both institutions' strengths to make a distinct difference to the underserved and vulnerable citizens in Baltimore.

Summary

In summary, NDMU respectfully objects to the establishment of the Bachelor of Science in Nursing program at LUM. Based on the evidence, we believe that LUM's proposal would constitute an unnecessary duplication of programs causing demonstrable harm to NDMU. Accordingly, we urge MHEC not to approve the proposal but also stand ready to discuss collaboration with LUM to facilitate mutual and amenable creative solutions to their student and institutional needs.

If you have any questions about this objection, please feel free to follow up with me at (410) 532-5321 or via email at mwalker12@ndm.edu. We appreciate your consideration of this matter.

Yours sincerely,



Martha Walker, Ph.D.

Provost & Vice President for Academic Affairs

cc: Matt Power, President, MICUA
Angela Sherman, Vice President for Academic Affairs, MICUA
Emily Dow, Assistant Secretary, MHEC
Trish Gordon-McCown, Director of Academic Affairs, MHEC
Lindsay Bates, Associate Director of Academic Program Review, MHEC